4. 2.	į	Inder the Paperwe	ork Reduction Act of	1995 no persons are requ	U.S. Patent and ired to respond to a collection o	d Trademark Offic	se through 07/31/2006. (e; U.S. DEPARTMENT O	F COMMERCE	
	Effective on 12/08/2004. Fees pursuant to the Consolidated Appropriations Act, 2005 (H.R. 4818).				Complete if Known				
				Application Number 10/781,418					
IPE	FEE T	KAN	12MII	IAL	Filing Date	02/18/2004			
10 400	\	for FY	2007		First Named Inventor	Morel, et al.			
_	\				Examiner Name	Michael lee			
MAR 27 2007	<u>"</u>					2622			
\P_3 &	/ Applicant claim	s small ent	ity status. See	9 37 CFR 1.27	Art Unit	2022			
THADRIANT C	TOTAL AMOUNT O	F PAYMEN	T (\$) 102	20.00	Attorney Docket No.	PF030039			
	METHOD OF PAYMENT	check all that a	apply)				•		
	Check Credit card Money Order Deposit Account Number 24498 ☐ Deposit Account: Deposit Account Number 07-0832 Deposit Account Name: THOMSON LICENSING INC. For the above-identified deposit account, the Director is hereby authorized to: (check all that apply) ☐ Charge fee(s) indicated below Charge any additional fee(s) or underpayments of fee(s) under 37 CFR 1.16 and 1.17 WARNING: Information on this form may become public. Credit card information should not be included on this form. Provide credit card information and authorization on PTO-2038.								
`.	FEE CALCULATION								
	1. BASIC FILING, SEARCH, AND EXAMINATION FEES FILING FEES SEARCH FEES Small Entity Small Entity Small Entity								
	Application Type	Fee (\$)	Fee (\$)	Fee (\$)	Fee (\$)	Fee (\$)	Fee (\$)	Fees Paid (\$)	
	Utility	300	150	500	250	200	100		
	Design	200	100	100	50	130	65		
	Plant	200	100	300	150	160	80		
	Reissue	300	150	500	250	600	300		
	Provisional	200	100	0	0	0	0		
	2. EXCESS CLAIM F Fee Description Each claim over 20 (incle Each independent claim Multiple dependent claim Total Claims - 20 HP = highest number of Independent Claims - 3 HP = highest number of 3. APPLICATION SIZ If the specification and	ding Reissue over 3 (includes or HP = total claims pain or HP = independent of the FEE d drawings of the 1.52(e)), the reof. See 35	ing Reissues) Extra Claims aid for, if greater Extra Claims claims paid for, if exceed 100 shale application s 5 U.S.C. 41(a)(1) heets / 50 =	Fee (\$) x than 20. Fee (\$) x greater than 3. eets of paper (excize fee due is \$251)(G) and 37 CFR Number of each (rou	Fee Paid (\$) Fee Paid (\$) =	E 5 2 3 <u>M</u> <u>F</u> eled sequenc ty) for each a	Small E ee (\$) 00 60 Multiple Depende ee (\$) ee or computer additional 50	Fee (\$) 25 100 180	
	Total Fees		-					\$1020.00	
ſ	SUBMITTED BY			Registration No.					

Name (Print/Type)	Registration No. (Afforney/Agent)	47,730	Telephone	317-587-4029
Signature	Mad &		Date	3/23/07
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